



**PELHAM FIRE DEPARTMENT**  
**P. O. Box 321**  
**Pelham, NH 03076**

**James F. Midgley**  
**Fire Chief**

**BLASTING APPLICATION / PERMIT**

Application is hereby made to the Town of Pelham Fire Department to obtain a permit for certain blasting operations in the Town of Pelham, New Hampshire. All operations shall be conducted in compliance with federal, state and local regulations and standards. No blasting operations shall begin until a blasting permit is secured. Reference is hereby made to the Town of Pelham Blasting Ordinance.

1. Attach copies of all information and documentation required per the Town of Pelham Blasting Ordinance.
2. Attach a brief written description and location of the proposed blasting work.
3. Blasting Location: \_\_\_\_\_
4. Proposed Start Date: \_\_\_\_\_ Proposed End Date: \_\_\_\_\_
5. Dig Safe #: \_\_\_\_\_
6. Company Contact Information  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone #: \_\_\_\_\_  
Fax #: \_\_\_\_\_  
Cell Phone #: \_\_\_\_\_
7. Please attach a check payable to the Town of Pelham in the amount of \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Operator/Company Representative

\_\_\_\_\_  
Name & Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Fire Chief or Designee